## STATE OF NEW HAMPSHIRE

## PART TIME HMO AND POS MEDICAL ACTIVE EMPLOYEE for Unrepreparented (Classified, Unclassified, Non-Classified and HR Confidential) Employees STATE & EMPLOYEE CONTRIBUTION CHART

## WITH \$20/\$40/\$60 EE CONTRIBUTIONS

## EFFECTIVE 01/01/2014

The employee's share of Point of Service and HMO plans are the 26 PP respective working rate, less the employee share from the CBA (\$20/\$40/\$60), times the  $\,\%$  of participation, then the employee share from the CBA (\$20/\$40/\$60) added back.

нмо

GROUP: 30 to 31.5 Hours

POS

HMC	EE CONTR	RIBUTION	HMO ER CO	W RATE		
	26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$76.58	\$1,991.08	\$226.30	\$5,883.80	\$7,874.88	
HL-2	\$153.15	\$3,981.90	\$452.58	\$11,767.08	\$15,748.98	
HL-3	\$241.83	\$6,287.58	\$727.34	\$18,910,84	\$25,198,42	

POS	EE CONTRIE	BUTION	POS ER CONT	RIBUTION	W RATE		
	26PP	ANNUAL	26PP	ANNUAL	TOTAL		
HL-1	\$88.38	\$2,297.88	\$273.50	\$7,111.00	\$9,408.88		
HL-2	\$176.75	\$4,595.50	\$547.00	\$14,222.00	\$18,817.50		
HL-3	\$279.60	\$7,269.60	\$878.41	\$22,838.66	\$30,108.26		

нмо

GROUP: 32 to 34.5 Hours

POS

HMC	EE CONTR	RIBUTION	HMO ER CO	W RATE		
	26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$62.43	\$1,623.18	\$240.45	\$6,251.70	\$7,874.88	
HL-2	\$124.86	\$3,246.36	\$480.87	\$12,502.62	\$15,748.98	
HL-3	\$196.38	\$5,105.88	\$772.79	\$20,092.54	\$25,198.42	

POS	EE CONTRIE	BUTION	POS ER CONT	W RATE	
	26PP	ANNUAL	26PP	ANNUAL	TOTAL
HL-1	\$71.28	\$1,853.28	\$290.60	\$7,555.60	\$9,408.88
HL-2	\$142.56	\$3,706.56	\$581.19	\$15,110.94	\$18,817.50
HL-3	\$224.70	\$5,842.20	\$933.31	\$24,266.06	\$30,108.26

нмо

GROUP: 35.0 to 37.0 Hours

POS

НМО	EE CONTR	RIBUTION	HMO ER CO	W RATE		
	26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$39.80	\$1,034.80	\$263.08	\$6,840.08	\$7,874.88	
HL-2	\$79.60	\$2,069.60	\$526.13	\$13,679.38	\$15,748.98	
HL-3	\$123.64	\$3,214.64	\$845.53	\$21,983.78	\$25,198.42	

POS	EE CONTRIE	BUTION	POS ER CONT	W RATE		
	26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$43.93	\$1,142.18	\$317.95	\$8,266.70	\$9,408.88	
HL-2	\$87.86	\$2,284.36	\$635.89	\$16,533.14	\$18,817.50	
HL-3	\$136.86	\$3,558.36	\$1,021.15	\$26,549.90	\$30,108.26	

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COMPANY-STATE SHARE (3003)

	POS 26 PP	%			
1 PERSON	361.88	20%	68.38	20.00	88.38
2 PERSON	723.75	20%	136.75	40.00	176.75
FAMILY	1,158.01	20%	219.60	60.00	279.60

MON	MONTHLY WORKING RATES										
		POS		HMO							
HL-1: 1 PERSON	\$	784.08	\$	656.24							
HL-2: 2 PERSON	\$	1,568.13	\$	1,312.41							
HL-3: FAMILY	\$	2,509.03	\$	2,099.86							

COMPANY-STATE SHARE (3006)

(37.5 to >)

POINT OF SERVICE (POS)

	HMO 26 PP		%			
1 PERSON	302.88		20%	56.58	20.00	76.58
2 PERSON	605.73		20%	113.15	40.00	153.15
FAMILY	969.17	Γ	20%	181.83	60.00	241.83

EMPLOYEE SHARE (3001)

HEALTH MAINTENANCE ORGANIZATION (HMO)

WEEKLY HRS RANGE	<u>%</u>	TYPE	PLAN	AMT PER 26 PP	<u>%</u>	TYPE	PLAN	AMT PER 26 PP	<u>%</u>	TYPE	PLAN	AMT PER 26 PP	<u>%</u>	TYPE	<u>PLAN</u>	AMT PER 26 PP
30.0	80%	HL	1	273.50	20%	HL	1	88.38	80%	HL	1	226.30	20%	HL	1	76.58
		HL	2	547.00		HL	2	176.75		HL	2	452.58		HL	2	153.15
(30 to 31.5)		HL	3	878.41		HL	3	279.60		HL	3	727.34		HL	3	241.83
32.0	85%	HL	1	290.60	15%	HL	1	71.28	85%	HL	1	240.45	15%	HL	1	62.43
		HL	2	581.19		HL	2	142.56		HL	2	480.87		HL	2	124.86
(32 to 34.5)		HL	3	933.31		HL	3	224.70		HL	3	772.79		HL	3	196.38
35.0	93%	HL	1	317.95	7%	HL	1	43.93	93%	HL	1	263.08	7%	HL	1	39.80
		HL	2	635.89		HL	2	87.86		HL	2	526.13		HL	2	79.60
(35 to 37)		HL	3	1021.15		HL	3	136.86		HL	3	845.53		HL	3	123.64
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FULL TIME	100%	HL	1	341.88	0%	HL	1	20.00	100%	HL	1	282.88	0%	HL	1	20.00
		HL	2	683.75		HL	2	40.00		HL	2	565.73		HL	2	40.00

EMPLOYEE SHARE (3004)